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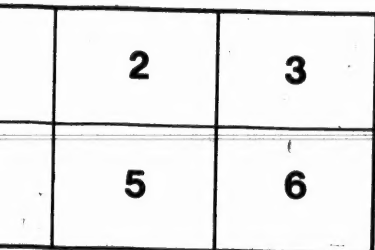
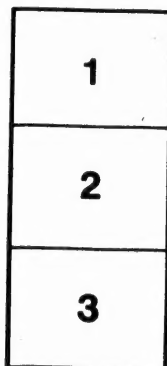
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Jos. P. Edwards A 61693
CHOLERA *Q 217*

AND ITS

TREATMENT,

WITH

SANITARY PRECAUTIONS.

PUBLISHED BY

JOHN GARDNER,

DISPENSING CHEMIST AND DRUGGIST,

WEST END, NOTRE DAME STREET,

MONTREAL.

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1866.

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CHOLERA & ITS TREATMENT.

The following is the material portion of a communication on the above subject from Dr. Hamlin, a well-known Missionary of the American Board, who had large opportunities of observation, and treatment at Constantinople last year :

The cholera which has just left us, after committing fearful ravages, is making its way into Europe, and will probably cross the Atlantic before another summer has passed.

Having been providentially compelled to have a good degree of practical acquaintance with it, and to see it in all its forms and stages during each of its invasions of Constantinople, I wish to make my friends in America some suggestions which may relieve anxiety or be of practical use.

1st. On the approach of cholera every family should be prepared to treat it without waiting for a physician. It does its work so expeditiously, that while you are waiting for the doctor it is done.

2nd. If you prepare for it, it will not come. I think there is no disease which may be avoided with so much certainty as the cholera. But providential circumstances, or the thoughtless indiscretions of some member of a household, may invite the attack, and the challenge will never be refused. It will probably be made in the night, your physician has been called in another direction, and you must treat the disease yourself or it will be fatal.

3rd. Causes of Attack.—I have personally investigated at least a hundred cases, and not less than three-fourths could be traced directly to improper diet, or to intoxicating drinks, or both united. Of the remainder, suppressed perspiration would comprise a large number. A strong, healthy, temperate, labouring man had a severe attack of cholera, and after the danger had passed off I was curious to ascertain the cause. He had been cautious and prudent in his diet. He used nothing intoxicating. His residence was in a good locality. But after some hours of hard labor and very profuse perspiration, he had laid down to take his customary nap right against an open window through which a very refreshing breeze was blowing. Another cause is drinking largely of cold water when hot and thirsty. Great fatigue, great anxiety, fright, fear, all figure among inciting causes. If one can avoid all these he is as safe from the cholera as being swept away by a comet.

4th. Symptoms of an Attack.—While cholera is prevalent in a place almost every one experiences more or less disturbances of digestion. It is doubtless in part imaginary. Every one notices the slightest variation of feeling and this gives an importance to mere trifles. There is often a slight nausea, or transient pains, or rumbling sounds, when no attack follows. No one is entirely free from these. But when diarrhoea commences though painless and slight, it is in reality the skirmishing party of the advancing column. It will have at first no single characteristic of Asiatic Cholera. But do not be deceived. It is the cholera nevertheless. Wait a little, give it time to get hold, say to yourself "I feel perfectly well, it will soon pass off" and you will soon repent your folly in vain. I have seen many a one commit suicide in this way.

Sometimes, though rarely the attack commences with vomiting. But in whatever way it commences it

is sure to hold on. In a very few hours the patient may sink into the collapse. The hands and feet become cold and purplish. The countenance at first nervous and anxious, becomes gloomy and apathetic, although a mental restlessness and raging thirst torment the sufferer while the powers of life are ebbing. The intellect remains clear, but all the social and moral feelings seem wonderfully to collapse with the physical powers. The patient knows he is to die, but cares not a snap about it.

In some cases though rarely, the diarrhæa continues for a day or two and the foolish person keeps about, then suddenly sinks, sends for a physician, and before he arrives "dies as the fool dieth."

COURSE OF TREATMENT.

Mixture No. 1.

1. For stopping the incipient diarrhæa. The mixture which I used in 1848 with great success, and again in 1855, has during this epidemic been used by thousands, and although the attacks have been more sudden and violent, it has fully established its reputation for efficiency and perfect safety. It consists of equal parts by measure of Laudanum, Spirits of Camphor and Tincture of Rhubarb, 30 drops for an adult on a lump of sugar, will often check the diarrhæa. But to prevent its return, care should always be taken to continue the medicine every 4 hours in diminishing doses 25, 20, 15, 10, 5, when careful diet is all that will be needed.

In case the first dose does not stay the diarrhæa, continue to give in increasing doses 35, 40, 45, 50, at every movement of the bowels. Large doses will produce no injury while the diarrhæa last. When that is checked, then is the time for caution. I have never seen a case of diarrhæa taken in season which was not thus controlled, but some cases of advanced diarrhæa, and especially of relapse, paid no heed to whatever.

As soon as this becomes apparent, I have always resorted to this course. Prepare a teacup of starch boiled as for use in starching linen, and stir into it a full teaspoonful of laudanum for an injection. Give one third at each movement of the bowels. In one desperate case abandoned as hopeless by a physician, I could not stop the diarrhæa until the seventh injection, which contained hardly a teaspoonful of laudanum. The patient recovered and is in perfect health. At the same time I use prepared chalk in 10-grain doses with a few drops of laudanum and camphor to each. But whatever course is pursued it must be followed up, and the diarrhæa controlled or the patient is lost.

2. Mustard poultices. These should be applied to the pit of the stomach, and kept on till the surface is well reddened.

3. The patient, however well he may feel, should rigidly observe perfect rest. To lie quietly on the back is one half the battle. In that position the enemy fires over you, but the moment you rise you are hit.

When the attack comes in the form of diarrhæa, these directions will enable every one to meet it successfully

Mixture No. 2.

4. But when the attack is more violent, and there is vomiting, or vomiting and purging, perhaps also cramps and colic pains, the following mixture is far more effective, and should always be resorted to. Messrs. Long, Trowbridge and Washburn have used it in very many cases, and with wonderful success. It consists of equal parts of Laudanum, Tincture of Capsicum, Tincture of Ginger, and Tincture of Cardamom Seeds. Dose, 30 to 40 drops, or half a teaspoonful in a little water, and to be increased according to the urgency of the case. In case the first dose should be ejected, the second, which should stand ready,

should be given immediately after the spasm of vomiting has ceased. During this late cholera siege, no one of us failed of controlling the vomiting and also the purging by at most the third dose. We have however, invariably made use of large mustard poultices, of strong pure mustard, applied to the stomach, bowels, calves of the legs, feet, etc., as the case seemed to require.

Collapse.—This is simply a more advanced stage of the disease, it indicates the gradual failing of all the powers of life. It is difficult to say when a case has become hopeless. At a certain point the body of the patient begins to emit a peculiar odor, which I call the death odor, for when that has become decided and unmistakable, I have never known the patient to recover. I have repeatedly worked upon such cases for hours with no permanent result. But the blue color, the cold extremities, the deeply sunken eye, the vanishing pulse, are no signs that the case is hopeless. Scores of such cases in the recent epidemic have recovered. In addition to the second mixture, brandy (a tablespoonful every half hour) bottles of hot water surrounding the patient, especially the extremities, sinapisms and friction, will often in an hour or two work wonders.

Thirst.—In these, and in all advanced cases, thirst creates intense suffering. The sufferer craves water, and as sure as he gratifies craving the worst symptoms return, and he falls a victim to the transient gratification. The only safe way is to have a faithful friend or attendant who will not heed his entreaties. The suffering may be, however, safely alleviated and rendered endurable; frequent gargling the throat and washing out the mouth will bring some relief. A spoonful of Gum Arabic water, or of chamomile tea, may frequently be given to wet the throat. "Lyndenham's White Decoction" may also be given

both as a beverage and nourishment, in small quantities, frequently. In a day or two the suffering from thirst will cease. In a large majority it has not been intense for more than 24 hours.

Diet.—Rice water, Arrowroot, Lyndenham's White Decoction, Crust water, Chamomile tea, are the best articles for a day or two after the attack is controlled. Chamomile is very valuable in restoring the tone of the stomach.

The Typhoid Fever.—A typhoid state for a few days will follow all severe cases; there is nothing alarming in this. It has very rarely proved fatal. Patience and careful nursing will bring it all right.

The greatest danger is from drinking too freely. When the patient seemed to be sinking, a little brandy and water or arrowroot and brandy have revived him. In this terrible visitation of the cholera, we have considered ourselves perfectly armed and equipped, with a hand-bag containing mixture No. 1, mixture No. 2 for vomiting etc., a few pounds of powdered mustard, a bottle of brandy, and a paper of chamomile flowers, and a paper of Gum Arabic.

I lay no claim to originality in recommending this course of treatment. I have adopted it from suggestions of able and experienced physicians. Having been the only doctor of many poor families living near me, I have tried various remedies recommended by physicians, but I have found none to be at all compared with the above. During the recent cholera, I cannot find that any treatment has been so successful as this.

Contagion. The idea of contagion should be abandoned. All the missionaries, who have been most with malignant cases day after day, are fully convinced of the non-contagiousness of the cholera. The incipient attacks which all have suffered from, are to be attributed to great fatigue, making the constitution liable to an attack.

SANITARY PRECAUTIONS.

In our last issue we referred to the probable visitation of cholera to Canada during the coming summer. We now revert to the subject, and to some sanitary precautions connected therewith, not with a view to creating a panic or exciting the fears of the people, but rather to allay such fears. We hold that to be familiar with the designs or mode of approach of an enemy is a point of advantage gained in defence; and to understand as far as possible the nature of cholera, the circumstances which tend to induce it and the steps necessary to prevent or check its development, as far as possible, is the duty of every one. These points should be intelligently studied, and rendered familiar to the mind; every available means of prevention or amelioration of the disease should be attended to—such as cleanliness of person, dwellings, yards, &c.; avoiding “all those employments or engagements in pleasure which tend to exhaust nervous energy and depress the bodily powers;” the practice of strict temperance in both eating and drinking, and avoiding all sudden or important changes in diet; avoiding the use of all quack or patent medicines, except such as are recommended by reliable medical men; the performance of our duty towards our fellow-men, and the exercise of every Christian virtue, especially maintaining a firm trust in God, who alone can control the pestilence. (Read 91st Psalm.) These things secured, the mind will not be disturbed by undue fears, nor will the body be especially liable to attack of cholera or any other form of disease.

ON SOME USEFUL DISINFECTING AGENTS.

For the sick-room, one of the most pleasant deodorizers or disinfectants is burnt coffee. One or two ounces of ground unroasted coffee may be sprinkled on a hot shovel, so as to roast it, when so long as the air

is greatly charged with organic matter, the smell of burnt coffee will be comparatively imperceptible; but when the odour of the coffee predominates, the offensive matters, before present will have disappeared.

For pouring down the pipes of sinks, water closets, &c., a solution of green copperas, say 1 lb. to half a pail of boiling water.

For privies, take 10, 20 or 30 lbs. of soda-ash and the same quantity of fresh lime, using one quart of boiling water to each lb. of soda ash, and slaking the lime with a little water, afterwards diluting it with more water till about the thickness of cream, then mix the two together in a capacious tub, and immediately pour over the contents of the privy.

The use of chloride of lime is well known. It may be placed, mixed with water, in saucers or dishes in cellars, and in holes and corners of doubtful cleanliness, and especially in rat holes.

At this season, cellars and root houses where vegetables have been stored should be looked to, all decomposing matters removed, drains examined, and preparation made for a thorough spring house cleaning and whitewashing. The latter is best done with quick lime. People should bear in mind that pure air and water are nature's great disinfectants and deodorizers. In times of epidemic disease, dry scrubbing is better for cleaning floors than the use of much water, and bed-rooms would be more easily kept clean and the air in them sweet, if the carpets were not fastened down, but were left so as to be readily and frequently taken up and exposed to the air.—*In part from the Journal of Board of Arts, &c. for U. C.*

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